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PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	MLF-600-14
First Named Inventor	Carrel W. EWING, et al.
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

VERTICAL-MOUNT ELECTRICAL POWER DISTRIBUTION PLUGSTRIP

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number **26329** OR ☐ Correspondence address below

Name **Richard B. Main**

Address **24441 Mines Road**

Address

City **Livermore**

State **CA**

ZIP **94550**

Country **USA**

Telephone **(408) 897-3000**

Fax **(408) 897-3102**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) **Carrel W.**

Family Name
or Surname **EWING**

Inventor's
Signature 

Date **8/9/01**

Residence: City **Incline Village**

State **NV**

Country **USA**

Citizenship **USA**

Mailing Address **285 Deer Court**

Mailing Address

City **Incline Village**

State **NV**

ZIP **89451**

Country **USA**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) **Brian P.**

Family Name
or Surname **AUCLAIR**

Inventor's
Signature 

Date **8/9/01**

Residence: City **Reno**

State **NV**

Country **USA**

Citizenship **USA**

Mailing Address **4540 Great Falls Loop**

Mailing Address

City **Reno**

State **NV**

ZIP **89511**

Country **USA**

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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ADDITIONAL INVENTOR(S)

Supplemental Sheet

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Andrew J.		CLEVELAND	
Inventor's Signature <i>Andrew J. Cleveland</i>		Date <i>8/9/01</i>	
Residence: City	Reno	State	NV
Country	USA	Citizenship	USA
Mailing Address 5419 Greenview Court			
Mailing Address			
City	Reno	State	NV
ZIP	89502	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James P.		MASKALY	
Inventor's Signature <i>James P. Maskaly</i>		Date <i>8/9/01</i>	
Residence: City	Sparks	State	NV
Country	USA	Citizenship	USA
Mailing Address 1568 Topeka Circle			
Mailing Address			
City	Sparks	State	NV
ZIP	89434	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Dennis W.		MCGLUMPHY	
Inventor's Signature <i>Dennis W. McGlumphy</i>		Date <i>8/9/01</i>	
Residence: City	Sun Valley	State	NV
Country	USA	Citizenship	USA
Mailing Address 764 Snowdrop Court			
Mailing Address			
City	Sun Valley	State	NV
ZIP	89433	Country	USA

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Mark J.		BIGLER	
Inventor's Signature <i>Mark J. Bigler</i>		Date <i>9-Aug-2001</i>	
Residence: City Eugene	State OR	Country USA	Citizenship USA
Mailing Address 3422 Willamette Street			
Mailing Address			
City Eugene	State OR	ZIP 97405	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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